

Journal of Drug Discovery and Therapeutics

Available Online at www.jddt.in

CODEN: - JDDTBP (Source: - American Chemical Society)

Volume 12, Issue 02; 2024, 78-83

The Patient Counseling and Patient Medication History Interview - A Review

Jyotirmoy Deb^{1*}, Mohibur Rahman², Jisu Das³, Bapan Banik⁴, Nargis Sultana⁵, Bapan Sarkar⁶

^{1,2,3,5} Department of Pharmacy, Huda Group of Institutions, Kanuwamari, Samaguri, Nagaon, Assam-782140

^{4,6} School of Pharmaceutical Science and Technology, Kanuwamari, Samaguri, Nagaon, Assam-782140

Received: 20-01-2024 / Revised: 25-02-2024 / Accepted: 27-03-2024

Corresponding author: Jyotirmoy Deb

Conflict of interest: No conflict of interest.

Abstract:

The skill of communication between patients and pharmacists has a significant impact on the procedure of medication counselling. The current vivid review provides a thorough practical loom in conducting the effective patient medication interview. The reason of this study was to assess pharmacist's practices of medication counselling. Communicate with the patient in a manner that encourages the respect for the healthcare provider and that enables the pharmacist to obtain an accurate and complete history. Communication skills and questioning techniques, especially when it comes to communicating with patients, are learned and take time to develop. Interpersonal communication plays a key role in the healthcare behaviour change process. Good communication between a patient and their pharmacist leads to an overall improvement in physical health, chronic disease management, and a better quality of life in regards to patient health.

Keywords: Counselling, medication interview, complete history, healthcare, communication skills

Background

Pharmacist's offer medication counselling services to progress patient understanding and their adherence to prescription directions, and to achieve the best promising health-related outcomes. The medication history is the part of the patient interview that provides the pharmacist the opportunity to utilize his or her expertise by precisely collecting each component of the medication history (however, a medication history may also be collected independent of a

comprehensive patient interview). The questions that you ask the patient, as well as the technique used, will enable you to learn exactly how, when, and why a patient takes each medication, as well as about any adverse reactions, allergies, or issues with medication cost the patient may have experienced.

The approach to the patient interview and medication history will change based on the situation in which you are practicing. For

example, if the situation is a community pharmacy and you are responding to a problem that may allow for self-care, your questions will be directed at meticulously characterizing the patient's complaint and obtaining specific information that will influence your assessment and plan for the patient. However, if you are in a hospital, the focus of the interview may need to be modified based on the patient's condition and the particular unit or department in which he or she is being cared for so that the patient's needs may be met.

INTRODUCTION

The patient interview is the primary way of obtaining comprehensive information about the patient in order to provide effective patient centered care, and the medication history component is the pharmacist's expertise. A methodological approach is used to obtain information from the patient, usually starting with determining the patient's chief complaint, also known as the reason for the healthcare visit, and then delving further into an exploration of the patient's specific complaint and problem. A comprehensive patient interview includes inquiring about the patient's medical, medication, social, personal, and family history, as well as a thorough review of systems and possibly a physical examination.

Regardless of the setting, your goal during the interview will be to provide patient centered care; this can be accomplished by combining your pharmacotherapeutic knowledge with a solid foundation of excellent communication and patient-interviewing skills. Excelling in these communication skills is a learned technique that takes time and practice to master. Once these skills are employed in practice, the relationship that is developed with the patient is often stronger, allowing for the

patient to have increased confidence and trust in your role as a healthcare provider.

The purpose of this chapter is to describe the various components of the comprehensive health history and to provide an overview of the skills and techniques required when communicating with the patient. This chapter will focus on the best practices to follow when collecting information from the patient.

COMMUNICATION SKILLS

Communication skills are the fundamental link between the pharmacist's expertise about drugs and his or her contribution to providing excellent patient centered care. Although communicating with a patient may seem like a simple task, it actually takes practice and knowledge to communicate with the patient in a manner that encourages respect for the healthcare provider and that enables the pharmacist to obtain an accurate and complete history. Some practitioners are able to naturally communicate with patients more effectively, whereas others have difficulty communicating with patients due to a variety of reasons, including their personality, comfort level, and confidence. However, regardless of one's natural abilities, communication skills and questioning techniques, especially when it comes to communicating with patients, are learned and take time to develop. A variety of excellent in-depth resources describe communication skills. This chapter examines the most pertinent skills required to conduct a comprehensive medication history. These skills and questioning techniques include:

- i. Active listening
- ii. Empathy
- iii. Building rapport
- iv. Open-ended questions
- v. Closed-ended questions

- vi. Leading questions
- vii. Silence
- viii. “Why” questions
- ix. Nonverbal communication cues

Active Listening

The first communication skill to be mastered is listening, specifically active listening. Listening is defined as hearing what is being said, whereas active listening is a dynamic process that includes both hearing what is being said as well as processing and interpreting the words that are spoken (and/or unspoken) to understand the complete message that is being delivered.

Empathy

Empathy is defined as the “intellectual identification with or vicarious experiencing of the feelings, thoughts, or attitudes of another.” The terms empathy and sympathy are often confused. Sympathy is when you feel sorry for the patient but do not feel the same emotions or are not in the same situation, whereas empathy is when you place yourself in your patient’s situation and respond based on either similar personal experiences or through vicarious understanding. When you express empathy, it allows your patient to feel as though you understand his or her unique experience and that you are applying your expertise to the patient as an individual.

Building Rapport

The first impression you make on your patient will weigh on the rest of the patient interview as well as affect your relationship with the patient. Building a good rapport sets the tone for the interview and allows the patient to feel comfortable with you, thereby making the lines of communication more open and honest.

Open and closed ended Questions

Open-ended questions are questions that require the patient to answer with more than a simple yes or no or nod of the head, whereas closed-ended questions generally limit the patient’s response to either a yes or no or a nod of the head. In general, open-ended questioning is the preferred technique to use during patient interviews to compel the patient to provide more in-depth and insightful responses.

Leading Questions

Leading questions are those that suggest a particular answer. These questions lead a patient to provide a response that he or she perceives to be the answer that the interviewer wants to hear.

Silence

The role of silence during your interaction with the patient is more significant than you may realize. By allowing moments of silence after asking a question, the patient is able to reflect upon your question and provide a more thoughtful and accurate response.

“Why” Questions

As you are interviewing your patient, avoiding “why” questions may prevent the patient from feeling as though he needs to defend his choices and actions. Although it may be necessary to learn the reasoning behind the patient’s choices and actions, the wording that you use may impact the response.

Nonverbal communication

Nonverbal communication is the sending of messages to or from your patient without the use of words. This type of communication plays an important role in your interactions with your patients because it can be as powerful as the words that are spoken. Nonverbal communication includes tone of voice, choice of language, facial expressions, body posture and position,

gestures, eye contact, appearance, and overall behaviour.

COMMUNICATION BARRIERS

Interpersonal communication plays a key role in the health behaviour change process. Good communication between a patient and their pharmacist leads to an overall improvement in physical health, chronic disease management, and a better quality of life in regards to patient health. A key aspect of good communication is a detailed medication history. Medication histories are vital in preventing prescription errors and reducing consequent risks to geriatric patients. However, patients and pharmacist often omit asking or informing about over-the-counter (OTC) and herbal medications because they consider them unimportant. These non-prescription drugs may be involved in harmful drug to drug interactions and other adverse drug effects.

Best Possible Medication History: Interview Guide

i. Hello
Mr./Mrs./Ms./Miss. _____
(client/patient/ resident)

My name is _____,
(introduce self/profession)

I would like to take some time to review the medications you take at home.

I have a list of medications from your chart/file, and want to make sure they are accurate and up to date. Would it be possible to discuss your medications with you (or a family member) at this time?

You may also wish to ask: Is this a convenient time for you? Do you have a family member who knows your medications that you think should join us? How can we contact them?

Do you have any medication allergies?
YES/ NO

If yes: What happens when you take _____ (medication name)?

ii. Information Gathering

Do you have your medication list or pill bottles (vials) with you?

Show and tell technique when they have brought the medication vials with them

How _____ do you take _____ (medication name)?

How often or When do you take _____ (medication name)?

Collect information about dose, route and frequency for each drug. If the patient is taking a medication differently than prescribed, record what the patient is actually taking and note the discrepancy. Are there any prescription medications you (or your physician) have recently stopped or changed?

What was the reason for this change?

iii. Community Pharmacy

What is the name of the pharmacy that you normally go to? (Name/location: anticipate more than one)

May we call your pharmacy to clarify your medications if needed?

iv. Over the Counter (OTC) Medications

Are there any medications that you are taking that you do not need a prescription for? (Do you take anything that you would buy without a doctor's prescription?) Give example, e.g. Aspirin. If yes: How do you take _____ (medication name)?

v. Vitamins/Minerals/Supplements

Do you take any vitamins (e.g. multivitamin)? If yes, how do you take _____? Do you take any

minerals (e.g. calcium, iron)? If yes, how do you take _____? Do you use any supplements (e.g. potassium, glucosamine, St. John's Wort)? If yes, how do you take _____?

vi. Eye/Ear/Nasal Drops

Do you use any eye drops? If yes, what are the names and how many drops do you use and how often? In which eye?

Do you use any ear or nose drops/nose sprays? If yes, how do you use them _____?

vii.

Inhalers/Patches/Creams/Ointments/Injectable/Samples

Do you use any inhalers? Any medicated patches? Medicated creams or ointments? Any injectable medications (e.g. insulin)? For each if yes, how do you take _____? (Name, strength, how often)

Did your doctor give you any medication samples to try in the last few months?

viii. ANTIBIOTICS

Have you used any antibiotics in the past three months? If so, what are they?

ix. MEDICATION ALLERGIES

Always ask clearly if the patient has any medication allergies and if they do, clarify the reaction they had to the medication.

x. CLOSING

This concludes our interview. Thank you for your time. Do you have any questions? If you remember anything after our discussion please contact me to update the information.

Medication reviews

Many patients were uncertain about details concerning their medications. In addition, patients did not demonstrate confidence about understanding the medications

associated with multiple medication use and the importance of completing medication reviews.

Conclusions

The patient interview, including the comprehensive health and medication history, is fundamental in providing excellent and accurate patient care. The learning and application of communication skills and techniques will allow for a patient encounter that is characterized by respect as well as offer you the opportunity to learn about patient-specific problems, thereby making your assessment, plan, and approach uniquely patientcentred. Additionally, use of a structured approach and framework to obtain all the pertinent information from the patient enables you to rely on a set foundation even as you direct the conversation according to the unique nuances of each particular patient. Awareness of the setting in which you are conducting the patient interview and knowing the purpose of the interview will enable you to gather the information you need to make an accurate assessment and plan, which is essential to providing high-quality, patientcentred care.

Reference

1. Salive ME. Multimorbidity in older adults. *Epidemiol Rev.* 2013;1–9.
2. Hugman B. *Healthcare communication.* Philadelphia: Pharmaceutical Press; 2009;80–82.
3. Berger BA. *Communication skills for pharmacists.* 3rd ed. Washington, DC: American Pharmacists Association; 2009;25–29.
4. Vijay Sai L. A descriptive review on patient medication history interview. *Review Articles. World Journal of Current Medical and Pharmaceutical Research (WJCMPR).* VOLUME-3, ISSUE-1, 2021.

5. Berie Tadesse Y. Pharmacists' Medication Counseling Practices and Knowledge and Satisfaction of Patients With an Outpatient Hospital Pharmacy Service. National Library of Medicine. doi: 10.1177/00469580231219457.
6. Oliverio A. L. Supporting Patient-Centered Pregnancy Counseling in Nephrology Care: A Semistructured Interview Study of Patients and Nephrologists. *Kidney International Reports*. 2023; 8, 2235–2242.
7. Treciokiene I. Hypertension management and drug-related problems. A case report of the 23-year history of Mr. Jonas. *Exploratory Research in Clinical and Social Pharmacy*. Volume 11, September 2023, 100313.
8. Salhia H. Patterns in counselling services provided at Saudi Ministry of Health medication counselling clinics – Reasons for referrals and subjects discussed: A cross-sectional study. *Saudi Pharmaceutical Journal*. Volume 31, Issue 7, July 2023, Pages 1157-1166.
9. Habib G. R. MD. Interviewing and Counseling the Dizzy Patient with Focus on Quality of Life. *Otolaryngologic Clinics of North America*. Volume 54, Issue 5, October 2021, Pages 853-861.
10. Wollen T. J. Development of a communication-based virtual patient counseling objective structured clinical examination (OSCE) for first year student pharmacists. *PEC Innovation*. Volume 3, 15 December 2023, 100215.